

**TIME OFF REQUEST FORM FOR  
FISCAL YEAR 2021-2022**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**NUMBER OF DAYS AVAILABLE FROM  
JULY 1, 2021 THROUGH JUNE 30, 2022**

Vacation hours \_\_\_\_\_  
Personal hours \_\_\_\_\_  
Floating holidays \_\_\_\_\_

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**REQUEST FOR TIME OFF**

Dates being requested \_\_\_\_\_  
# of vacation hours being requested \_\_\_\_\_  
# of personal hours being requested \_\_\_\_\_  
floating holiday being requested \_\_\_\_\_

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**TIME LEFT AFTER THIS REQUEST**

Vacation hours \_\_\_\_\_  
Personal hours \_\_\_\_\_  
Floating holidays \_\_\_\_\_

**APPROVAL**

\_\_\_\_\_  
Supervisor

\_\_\_\_\_  
Date

Please use a separate request form for each occurrence of time off